
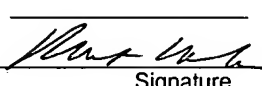


PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)		Docket No. (Optional) 376462001700																					
	In re Application of Benjamin FRYDMAN et al.																						
	Application Number 10/606,016	Filed June 24, 2003																					
	For: PORPHYRIN-POLYAMINE CONJUGATES FOR CANCER THERAPY																						
	Art Unit 1614	Examiner Not Yet Assigned																					
<p>This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.</p> <p>The requested extension and appropriate non-small-entity fee are as follows (check time period desired):</p> <table style="width: 100%; border: none;"> <tr> <td style="width: 15%;"><input type="checkbox"/></td> <td style="width: 65%;">One month (37 CFR 1.17(a)(1))</td> <td style="width: 20%; text-align: right;">\$</td> <td style="width: 10%;"></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Two months (37 CFR 1.17(a)(2))</td> <td style="text-align: right;">\$</td> <td></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Three months (37 CFR 1.17(a)(3))</td> <td style="text-align: right;">\$</td> <td></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Four months (37 CFR 1.17(a)(4))</td> <td style="text-align: right;">\$</td> <td></td> </tr> <tr> <td><input checked="" type="checkbox"/></td> <td>Five months (37 CFR 1.17(a)(5))</td> <td style="text-align: right;">\$</td> <td style="text-align: right;">2010.00</td> </tr> </table> <p><input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown above is reduced by one-half, and the resulting fee is: \$ <u>1005.00</u></p> <p><input type="checkbox"/> A check in the amount of the fee is enclosed.</p> <p><input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.</p> <p><input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account.</p> <p><input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>03-1952</u></p> <p>I have enclosed a duplicate copy of this sheet. Fee Transmittal form (PTO/SB/17) is attached to this submission in duplicate.</p> <p>I am the <input type="checkbox"/> applicant/inventor.</p> <p><input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).</p> <p><input checked="" type="checkbox"/> attorney or agent of record. Registration Number <u>39,933</u></p> <p><input type="checkbox"/> attorney or agent under 37 CFR 1.34(a). Registration number if acting under 37 CFR 1.34(a) _____</p> <p><u>April / 3, 2004</u> Date</p> <p><u>(650) 813-5715</u> Telephone Number</p> <div style="text-align: right; margin-top: 20px;">  Signature <u>Robert K. Cerpa</u> Typed or printed name </div> <p><small>NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below</small></p>				<input type="checkbox"/>	One month (37 CFR 1.17(a)(1))	\$		<input type="checkbox"/>	Two months (37 CFR 1.17(a)(2))	\$		<input type="checkbox"/>	Three months (37 CFR 1.17(a)(3))	\$		<input type="checkbox"/>	Four months (37 CFR 1.17(a)(4))	\$		<input checked="" type="checkbox"/>	Five months (37 CFR 1.17(a)(5))	\$	2010.00
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<input checked="" type="checkbox"/>	Five months (37 CFR 1.17(a)(5))	\$	2010.00																				
<input checked="" type="checkbox"/> Total of <u>1</u> forms are submitted.																							

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